

Patient Name : Mr.GUPTA APOORV	Collected : 14/Apr/2023 11:14AM
Age/Gender : 34 Y 0 M 28 D/M	Received : 14/Apr/2023 02:47PM
UHID/MR No : CSAR.0000128386	Reported : 14/Apr/2023 07:42PM
Visit ID : CSAROPV290489	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobE37108	

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
-----------	--------	------	-----------------	--------

HEMOGRAM , WHOLE BLOOD-EDTA

HAEMOGLOBIN	14.9	g/dL	13-17	Spectrophotometer
PCV	44.10	%	40-50	Electronic pulse & Calculation
RBC COUNT	5.1	Million/cu.mm	4.5-5.5	Electrical Impedence
MCV	86.5	fL	83-101	Calculated
MCH	29.3	pg	27-32	Calculated
MCHC	33.8	g/dL	31.5-34.5	Calculated
R.D.W	13	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	6,790	cells/cu.mm	4000-10000	Electrical Impedence

DIFFERENTIAL LEUCOCYTIC COUNT (DLC)

NEUTROPHILS	45.9	%	40-80	Electrical Impedence
LYMPHOCYTES	44.5	%	20-40	Electrical Impedence
EOSINOPHILS	1.2	%	1-6	Electrical Impedence
MONOCYTES	7.9	%	2-10	Electrical Impedence
BASOPHILS	0.5	%	<1-2	Electrical Impedence

ABSOLUTE LEUCOCYTE COUNT

NEUTROPHILS	3116.61	Cells/cu.mm	2000-7000	Electrical Impedence
LYMPHOCYTES	3021.55	Cells/cu.mm	1000-3000	Electrical Impedence
EOSINOPHILS	81.48	Cells/cu.mm	20-500	Electrical Impedence
MONOCYTES	536.41	Cells/cu.mm	200-1000	Electrical Impedence
BASOPHILS	33.95	Cells/cu.mm	0-100	Electrical Impedence

PLATELET COUNT

PLATELET COUNT	278000	cells/cu.mm	150000-410000	Electrical impedence
----------------	--------	-------------	---------------	----------------------

ERYTHROCYTE SEDIMENTATION RATE (ESR)

ERYTHROCYTE SEDIMENTATION RATE (ESR)	12	mm at the end of 1 hour	0-15	Modified Westgren method
--------------------------------------	----	-------------------------	------	--------------------------

PERIPHERAL SMEAR

RBCs: are normocytic normochromic

WBCs: are normal in total number with normal distribution and morphology.

PLATELETS: appear adequate in number.

HEMOPARASITES: negative

IMPRESSION: NORMOCYTIC NORMOCHROMIC BLOOD PICTURE.

Patient Name : Mr.GUPTA APOORV	Collected : 14/Apr/2023 11:14AM
Age/Gender : 34 Y 0 M 28 D/M	Received : 14/Apr/2023 02:47PM
UHID/MR No : CSAR.0000128386	Reported : 14/Apr/2023 07:42PM
Visit ID : CSAROPV290489	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobE37108	

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method



SIN No:BED230093229

Patient Name : Mr.GUPTA APOORV	Collected : 14/Apr/2023 11:14AM
Age/Gender : 34 Y 0 M 28 D/M	Received : 14/Apr/2023 02:47PM
UHID/MR No : CSAR.0000128386	Reported : 14/Apr/2023 05:56PM
Visit ID : CSAROPV290489	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobE37108	

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
-----------	--------	------	-----------------	--------

BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD-EDTA

BLOOD GROUP TYPE	A			Microplate Hemagglutination
Rh TYPE	Positive			Microplate Hemagglutination



SIN No:BED230093229

Patient Name : Mr.GUPTA APOORV	Collected : 14/Apr/2023 11:16AM
Age/Gender : 34 Y 0 M 28 D/M	Received : 14/Apr/2023 04:05PM
UHID/MR No : CSAR.0000128386	Reported : 14/Apr/2023 07:01PM
Visit ID : CSAROPV290489	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobE37108	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
GLUCOSE, FASTING , NAF PLASMA	91	mg/dL	70-100	HEXOKINASE

Comment:

As per American Diabetes Guidelines

Fasting Glucose Values in mg/d L	Interpretation
<100 mg/dL	Normal
100-125 mg/dL	Prediabetes
≥126 mg/dL	Diabetes

GLUCOSE, POST PRANDIAL (PP), 2 HOURS , NAF PLASMA	81	mg/dL	70-140	HEXOKINASE
---	----	-------	--------	------------

Comment:

It is recommended that FBS and PPBS should be interpreted with respect to their Biological reference ranges and not with each other.

Conditions which may lead to lower postprandial glucose levels as compared to fasting glucose levels may be due to reactive hypoglycemia, dietary meal content, duration or timing of sampling after food digestion and absorption, medications such as insulin preparations, sulfonylureas, amylin analogues, or conditions such as overproduction of insulin.

Ref: Marks medical biochemistry and clinical approach

Patient Name : Mr.GUPTA APOORV	Collected : 14/Apr/2023 11:16AM
Age/Gender : 34 Y 0 M 28 D/M	Received : 14/Apr/2023 04:05PM
UHID/MR No : CSAR.0000128386	Reported : 14/Apr/2023 07:01PM
Visit ID : CSAROPV290489	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobE37108	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
HBA1C, GLYCATED HEMOGLOBIN , WHOLE BLOOD-EDTA	5.2	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG) , WHOLE BLOOD-EDTA	103	mg/dL		Calculated

Comment:

Reference Range as per American Diabetes Association (ADA):

REFERENCE GROUP	HBA1C IN %
NON DIABETIC ADULTS >18 YEARS	<5.7
AT RISK (PREDIABETES)	5.7 – 6.4
DIAGNOSING DIABETES	≥ 6.5
DIABETICS	
· EXCELLENT CONTROL	6 – 7
· FAIR TO GOOD CONTROL	7 – 8
· UNSATISFACTORY CONTROL	8 – 10
· POOR CONTROL	>10

Note: Dietary preparation or fasting is not required.

1. A1C test should be performed at least two times a year in patients who are meeting treatment goals (and who have stable glycemic control).
2. Lowering A1C to below or around 7% has been shown to reduce microvascular and neuropathic complications of type 1 and type 2 diabetes. When mean annual HbA1c is <1.1 times ULN (upper limit of normal), renal and retinal complications are rare, but complications occur in >70% of cases when HbA1c is >1.7 times ULN.
3. Falsely low HbA1c (below 4%) may be observed in patients with clinical conditions that shorten erythrocyte life span or decrease mean erythrocyte age. HbA1c may not accurately reflect glycemic control when clinical conditions that affect erythrocyte survival are present. Fructosamine may be used as an alternate measurement of glycemic control



Patient Name : Mr.GUPTA APOORV	Collected : 14/Apr/2023 11:16AM
Age/Gender : 34 Y 0 M 28 D/M	Received : 14/Apr/2023 02:54PM
UHID/MR No : CSAR.0000128386	Reported : 14/Apr/2023 04:33PM
Visit ID : CSAROPV290489	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobE37108	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
-----------	--------	------	-----------------	--------

LIPID PROFILE , SERUM

TOTAL CHOLESTEROL	236	mg/dL	<200	CHO-POD
TRIGLYCERIDES	144	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	51	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	185	mg/dL	<130	Calculated
LDL CHOLESTEROL	156.3	mg/dL	<100	Calculated
VLDL CHOLESTEROL	28.8	mg/dL	<30	Calculated
CHOL / HDL RATIO	4.63		0-4.97	Calculated

Comment:

Reference Interval as per National Cholesterol Education Program (NCEP) Adult Treatment Panel III Report.

	Desirable	Borderline High	High	Very High
TOTAL CHOLESTEROL	< 200	200 - 239	≥ 240	
TRIGLYCERIDES	<150	150 - 199	200 - 499	≥ 500
LDL	Optimal < 100 Near Optimal 100-129	130 - 159	160 - 189	≥ 190
HDL	≥ 60			
NON-HDL CHOLESTEROL	Optimal <130; Above Optimal 130-159	160-189	190-219	>220

Measurements in the same patient can show physiological and analytical variations.

NCEP ATP III identifies non-HDL cholesterol as a secondary target of therapy in persons with high triglycerides.



Patient Name : Mr.GUPTA APOORV	Collected : 14/Apr/2023 11:16AM
Age/Gender : 34 Y 0 M 28 D/M	Received : 14/Apr/2023 02:54PM
UHID/MR No : CSAR.0000128386	Reported : 14/Apr/2023 04:33PM
Visit ID : CSAROPV290489	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobE37108	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
-----------	--------	------	-----------------	--------

LIVER FUNCTION TEST (LFT) , SERUM

BILIRUBIN, TOTAL	0.44	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.09	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.35	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	29	U/L	<50	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	23.0	U/L	<50	IFCC
ALKALINE PHOSPHATASE	93.00	U/L	30-120	IFCC
PROTEIN, TOTAL	6.95	g/dL	6.6-8.3	Biuret
ALBUMIN	4.29	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	2.66	g/dL	2.0-3.5	Calculated
A/G RATIO	1.61		0.9-2.0	Calculated



SIN No:SE04349042

Patient Name : Mr.GUPTA APOORV	Collected : 14/Apr/2023 11:16AM
Age/Gender : 34 Y 0 M 28 D/M	Received : 14/Apr/2023 02:54PM
UHID/MR No : CSAR.0000128386	Reported : 14/Apr/2023 04:33PM
Visit ID : CSAROPV290489	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobE37108	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
-----------	--------	------	-----------------	--------

RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT) , SERUM

CREATININE	0.75	mg/dL	0.72 – 1.18	JAFFE METHOD
UREA	35.70	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	16.7	mg/dL	8.0 - 23.0	Calculated
URIC ACID	7.40	mg/dL	3.5–7.2	Uricase PAP
CALCIUM	9.20	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	3.40	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	142	mmol/L	136–146	ISE (Indirect)
POTASSIUM	4.6	mmol/L	3.5–5.1	ISE (Indirect)
CHLORIDE	108	mmol/L	101–109	ISE (Indirect)



SIN No:SE04349042

Patient Name : Mr.GUPTA APOORV	Collected : 14/Apr/2023 11:16AM
Age/Gender : 34 Y 0 M 28 D/M	Received : 14/Apr/2023 02:54PM
UHID/MR No : CSAR.0000128386	Reported : 14/Apr/2023 04:33PM
Visit ID : CSAROPV290489	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobE37108	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	23.00	U/L	<55	IFCC



SIN No:SE04349042

Patient Name : Mr.GUPTA APOORV	Collected : 14/Apr/2023 11:16AM
Age/Gender : 34 Y 0 M 28 D/M	Received : 14/Apr/2023 02:53PM
UHID/MR No : CSAR.0000128386	Reported : 14/Apr/2023 04:01PM
Visit ID : CSAROPV290489	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobE37108	

DEPARTMENT OF IMMUNOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
-----------	--------	------	-----------------	--------

THYROID PROFILE (TOTAL T3, TOTAL T4, TSH) , SERUM

TRI-IODOTHYRONINE (T3, TOTAL)	0.85	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	11.38	µg/dL	6.09-12.23	CLIA
THYROID STIMULATING HORMONE (TSH)	3.801	µIU/mL	0.34-5.60	CLIA

Comment:

Serum TSH concentrations exhibit a diurnal variation with the peak occurring during the night and the nadir occurring between 10 a.m. and 4 p.m. In primary hypothyroidism, thyroid-stimulating hormone (TSH) levels will be elevated. In primary hyperthyroidism, TSH levels will be low. Elevated or low TSH in the context of normal free thyroxine is often referred to as subclinical hypo- or hyperthyroid-ism, respectively. Physiological rise in Total T3 / T4 levels is seen in pregnancy and in patients on steroid therapy.

Recommended test for T3 and T4 is unbound fraction or free levels as it is metabolically active.

Note:

For pregnant females	Bio Ref Range for TSH in uIU/ml (As per American Thyroid Association)
First trimester	0.1 - 2.5
Second trimester	0.2 - 3.0
Third trimester	0.3 - 3.0



Patient Name : Mr.GUPTA APOORV	Collected : 14/Apr/2023 11:16AM
Age/Gender : 34 Y 0 M 28 D/M	Received : 14/Apr/2023 04:17PM
UHID/MR No : CSAR.0000128386	Reported : 14/Apr/2023 04:34PM
Visit ID : CSAROPV290489	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobE37108	

DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
-----------	--------	------	-----------------	--------

COMPLETE URINE EXAMINATION , URINE

PHYSICAL EXAMINATION

COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
pH	5.5		5-7.5	DOUBLE INDICATOR
SP. GRAVITY	1.025		1.002-1.030	Bromothymol Blue

BIOCHEMICAL EXAMINATION

URINE PROTEIN	NEGATIVE		NEGATIVE	PROTEIN ERROR OF INDICATOR
GLUCOSE	NEGATIVE		NEGATIVE	GLUCOSE OXIDASE
URINE BILIRUBIN	NEGATIVE		NEGATIVE	AZO COUPLING REACTION
URINE KETONES (RANDOM)	NEGATIVE		NEGATIVE	SODIUM NITRO PRUSSIDE
UROBILINOGEN	NORMAL		NORMAL	MODIFIED EHRlich REACTION
BLOOD	NEGATIVE		NEGATIVE	Peroxidase
NITRITE	NEGATIVE		NEGATIVE	Diazotization
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	LEUCOCYTE ESTERASE

CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY

PUS CELLS	2-3	/hpf	0-5	Microscopy
EPITHELIAL CELLS	1-2	/hpf	<10	MICROSCOPY
RBC	NIL	/hpf	0-2	MICROSCOPY
CASTS	NIL		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY



SIN No:UR2097712

Patient Name : Mr.GUPTA APOORV	Collected : 14/Apr/2023 11:16AM
Age/Gender : 34 Y 0 M 28 D/M	Received : 14/Apr/2023 04:17PM
UHID/MR No : CSAR.0000128386	Reported : 14/Apr/2023 05:31PM
Visit ID : CSAROPV290489	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobE37108	

DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
URINE GLUCOSE(POST PRANDIAL)	NEGATIVE		NEGATIVE	Dipstick



SIN No:UPP014576

Patient Name : Mr.GUPTA APOORV	Collected : 14/Apr/2023 11:16AM
Age/Gender : 34 Y 0 M 28 D/M	Received : 15/Apr/2023 03:07PM
UHID/MR No : CSAR.0000128386	Reported : 15/Apr/2023 04:49PM
Visit ID : CSAROPV290489	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobE37108	

DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324


Test Name	Result	Unit	Bio. Ref. Range	Method
URINE GLUCOSE(FASTING)	NEGATIVE		NEGATIVE	Dipstick

*** End Of Report ***

Result/s to Follow:
PERIPHERAL SMEAR



Dr. Prasanna
M.B.B.S, M.D
Consultant Pathologist



DR. PRASHANTH. R
M.B.B.S, MD
Consultant Pathologist



Dr. Anita Shobha Flynn
M.B.B.S, MD (Pathology)
Consultant Pathologist



Patient Name : Mr. GUPTA APOORV

Age/Gender : 34 Y/M

UHID/MR No. : CSAR.0000128386

OP Visit No : CSAROPV290489

Sample Collected on :

Reported on : 14-04-2023 16:49

LRN# : RAD1976631

Specimen :

Ref Doctor : SELF

Emp/Auth/TPA ID : bobE37108

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

- Trachea central.
- Mediastinum is central.
- Cardiac silhouette appear normal.
- Visualized lung fields appear normal.
- Bilateral hilum appear normal.
- CP angles are clear.

IMPRESSION : No obvious gross abnormality noted in the x-ray.

**DR. RAMESH G
CONSULTANT RADIOLOGIST**

ADVICE : Higher imaging techniques to be done, if clinically needed, depending on the condition of the patient.

Patient Name : Mr. GUPTA APOORV

Age/Gender : 34 Y/M

UHID/MR No. : CSAR.0000128386

OP Visit No : CSAROPV290489

Sample Collected on :

Reported on : 14-04-2023 16:37

LRN# : RAD1976631

Specimen :

Ref Doctor : SELF

Emp/Auth/TPA ID : bobE37108

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

LIVER : Normal in size & echotexture normal. No focal lesion seen. No intra hepatic biliary duct dilatation. Portal & hepatic veins appears normal. CBD is not dilated.

GALL BLADDER : Minimally distended.

PANCREAS : Obscured by bowel gas. However the visualized parts of the pancreas appear grossly normal. Para-Aortic areas could not be seen.

SPLEEN : Normal in size and echotexture normal. No focal / diffuse lesions.

KIDNEYS : RIGHT KIDNEY : 10.3 x 4.5 cms, LEFT KIDNEY : 11.5 x 5.1 cms, normal parenchymal thickness. Both kidneys are normal in size and echotexture.

No calculi. No pelvicalyceal dilatation on both sides. Corticomedullary differentiation is well maintained.

URINARY BLADDER : Moderately distended. No intraluminal calculi/mass lesion seen.

PROSTATE : Normal in size & echotexture.

IMPRESSION : No sonologically detectable abnormality seen in the present study.

DR. RAMESH G
CONSULTANT RADIOLOGIST

(The sonography findings should always be considered in correlation with the clinical and other investigation findings where applicable).It is only a professional opinion.Not valid for medico-legal purpose) Higher imaging techniques to be done, depending on the condition of the patient, if clinically needed.



भारत निर्वाचन आयोग
पहचान पत्र
ELECTION COMMISSION OF INDIA
IDENTITY CARD

XGF1303585



निर्वाचक का नाम :

अपूर्व गुप्ता

Elector's Name :

APURAV GUPTA

पिता का नाम : अखिलेश गुप्ता

Father's Name : AKHILESH GUPTA

लिंग / Sex : पुरुष / Male

जन्मतिथि DOB : 17/03/1989

Delete Archive Report Reply Reply all Forward Read / Unre

FW: Booking of MR. GUPTA APOORV



On 14-Apr-2023, at 10:32 AM, Wellness : Mediwheel : New Delhi <wellness@mediwheel.in> wrote:

Dear Team

Please note the following booking.

S. No.	Company Name	PACKAGE NAME	Booking	EMP-NAME	AGE	GENDER	
1	Arcofemi/Mediwheel/MALE/FEMALE	Arcofemi MediWheel Full Body Annual Plus Male 2D ECHO (Metro)	bobE37108	MR. GUPTA APOORV	31	Male	apoorv.gupta@mediwheel.in

Thanks & Regards

Lav Gupta

<Outlook-cid_part1..png>

Arcofemi Health Care Ltd. | F-701 A, Lado Sarai, Mehrauli | New Delhi – 110 030
M. 8800465156 Email : wellness@mediwheel.in; | Web: www.mediwheel.in

Deepak C

Executive-Corporate Sales

Mob :

Direct :

Board No : 040 4904 7777

Apollo Health & Lifestyle Limited

#7-1-617/A, 615 & 616, Imperial Towers,
7th Floor, Opp. Ameerpet Metro Station,
Ameerpet, Hyderabad 500038, Telangana.



Reply

Forward